



Attorney's Docket No.: 04838-062001

Receipt

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Lawrence W. Yonge III
Serial No. : 09/632,609
Filed : August 4, 2000
Title : METHOD AND PROTOCOL TO SUPPORT CONTENTION-FREE
INTERVALS AND QOS IN A CSMA NETWORK

Art Unit : 2731
Examiner : Unknown

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Technology Center 2600

Commissioner for Patents
Washington, D.C. 20231

SECOND REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Please correct the filing receipt for the above-referenced application so that the title reads: --Method and Protocol to Support Contention-Free Intervals and QoS in a CSMA Network--.

Please supply a corrected filing receipt to the undersigned with respect to this application. A copy of the original filing receipt showing the desired changes in red ink is attached for your convenience.

CERTIFICATE OF MAILING BY FIRST CLASS MAIL

I hereby certify under 37 CFR §1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

Date of Deposit

12-19-00

Signature

Maureen Christiano

MAUREEN CHRISTIANO

Typed or Printed Name of Person Signing Certificate

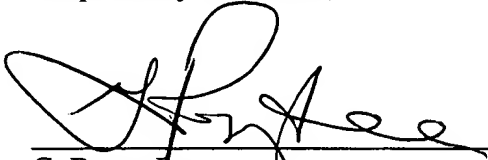
Applicant : Lawrence W. Yoo III
Serial No. : 09/632,609
Filed : August 4, 2000
Page : 2

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No fee is believed to be due. If, however, there are any charges or credits, please apply them to Deposit Account No. 06-1050.

Respectfully submitted,

Date: 12/19/00



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/632,609	08/04/2000	2731	876	04838-062001	46	22	2

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FILING RECEIPT



OC000000005587119

Date Mailed: 11/30/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

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James Philip Patella, Hernando, FL ;
William E. Earnshaw, Ocala, FL ;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 09/27/2000

Title

Method and protocol support contention-free intervals and qos in a csma network

Preliminary Class

370

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Data entry by : MARTIN, DIANE

Team : OIPE

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Bib Data Sheet

SERIAL NUMBER 09/632,609	FILING DATE 08/04/2000 RULE -	CLASS 370	GROUP ART UNIT 2731	ATTORNEY DOCKET NO. 04838-062001
APPLICANTS Lawrence W. Yonge III, Ocala, FL ; Brian E. MarkWalter, Ocala, FL ; Stanley J. Kostoff, II, Ocala, FL ; James Philip Patella, Hernando, FL ; William E. Earnshaw, Ocala, FL ;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/27/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY FL	SHEETS DRAWING 46	TOTAL CLAIMS 22 INDEPENDENT CLAIMS 2
ADDRESS Fish & Richardson P C 225 Franklin Street Boston ,MA 02110-2804				
TITLE Method and protocol to support contention-free intervals and qos in a csma network				
FILING FEE RECEIVED 876	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	